



## UNITED STATES PATENT AND TRADEMARK OFFICE

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UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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Bib Data Sheet

CONFIRMATION NO. 2824

<b>SERIAL NUMBER</b> 09/784,466	<b>FILING DATE</b> 02/15/2001 <b>RULE</b>	<b>CLASS</b> 074	<b>GROUP ART UNIT</b> 3682	<b>ATTORNEY DOCKET NO.</b> 60,130-1001	
<b>APPLICANTS</b> Nigel Victor Spurr, Birmingham, UNITED KINGDOM;  <b>** CONTINUING DATA *****</b> <i>none w/</i> <b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM GB0003686.3 02/18/2000  <b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 03/14/2001</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> Karin H. Butchko Carlson, Gaskey & Olds, P.C. Suite 350 400 W. Maple Birmingham, MI 48009					
<b>TITLE</b> Actuator assemblies					
<b>FILING FEE RECEIVED</b> 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

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APPLICATION NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCK
09/784,466	02/15/2001	185	3682	60,130-10

## APPLICANT

NIGEL VICTOR SPURR, BIRMINGHAM, GBX.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED GBX GB0003686.3

02/18/2000

FOREIGN FILING LICENSE GRANTED 03/14/2001

Foreign priority claimed 35 USC 119 (a-d) conditions met	O yes O no O yes O no O Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEP CLA
Verified and acknowledged	Examiner's Name Initials	GBX	2	20	

## ADDRESS

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## TITLE

ACTUATOR ASSEMBLIES